

ISSUE SLIP STAPLE AREA (for additional work references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	g l	10	1-29-01
RESPONSE FORMALITY REVIEW			02/20/01

INDEX OF CLAIMS

Rejected N
 Allowed I
 (Through numeral) Canceled A
 Restricted O

Non-elected
 Interference
 Appeal
 Objected

Claim	Date	Claim	Date	Claim	Date
1	1/17/01	51		101	
2	1/17/01	52		102	
3	1/17/01	53		103	
4	1/17/01	54		104	
5	1/17/01	55		105	
6	1/17/01	56		106	
7	1/17/01	57		107	
8	1/17/01	58		108	
9	1/17/01	59		109	
10	1/17/01	60		110	
11	1/17/01	61		111	
12	1/17/01	62		112	
13	1/17/01	63		113	
14	1/17/01	64		114	
15	1/17/01	65		115	
16	1/17/01	66		116	
17	1/17/01	67		117	
18	1/17/01	68		118	
19	1/17/01	69		119	
20	1/17/01	70		120	
21	1/17/01	71		121	
22	1/17/01	72		122	
23	1/17/01	73		123	
24	1/17/01	74		124	
25	1/17/01	75		125	
26	1/17/01	76		126	
27	1/17/01	77		127	
28	1/17/01	78		128	
29	1/17/01	79		129	
30	1/17/01	80		130	
31	1/17/01	81		131	
32	1/17/01	82		132	
33	1/17/01	83		133	
34	1/17/01	84		134	
35	1/17/01	85		135	
36	1/17/01	86		136	
37	1/17/01	87		137	
38	1/17/01	88		138	
39	1/17/01	89		139	
40	1/17/01	90		140	
41	1/17/01	91		141	
42	1/17/01	92		142	
43	1/17/01	93		143	
44	1/17/01	94		144	
45	1/17/01	95		145	
46	1/17/01	96		146	
47	1/17/01	97		147	
48	1/17/01	98		148	
49	1/17/01	99		149	
50	1/17/01	100		150	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

LEFT INSIDE.